Docket No.:

DECLARATION AND POWER OF ATTORNEY OR APPLICATION FOR UNITED STATES PATENT

below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated below under my name;

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD OF PRODUCING OPTICALLY ACTIVE LACTONE COMPOUND

described and claimed in the specification: Check one

*a.

attached hereto.

h M filed on February 6, 2004 as Application Serial No. 10/772,405

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duty to disclose to the Office all information known to me

to be material to patentability as defined in Title 37, Code of Federal Regulations \$1.56. Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) filed within one year prior to this application are hereby claimed:

Japanese Patent Application No. 2003-41,416 filed February 19, 2003 Japanese Patent Application No. 2003-310,279 filed September 2, 2003

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s):

I hereby appoint the following as my attorneys of record with full power of substitution and revocation to prosecute this application and to transact all business in the Patent Office:

James A. Oliff, Reg. No. 27,075; William P. Berridge, Reg. No. 30,024; Kirk M. Hudson, Reg. No. 27,562; Thomas J. Pardini, Reg. No. 30,411; and Edward P. Walker, Reg. No. 31,450.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, P.O. BOX 19928, ALEXANDRIA, VIRGINIA 22320, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Typewritten Full Name of Sole or First Inventor KATSUKI Tsutomu /, Family Name Middle Initial Given Name out onu Inventor's Signature pril Date of Signature Fukuoka City, Fukuoka Pref.. Japan Residence City State or Province Country Japanese Citizenship c/o Kyushu University, 6-10-1, Hakozaki, Higashi-Ku Post Office Address (Insert complete mailing Fukuoka City, Fukuoka Pref., Japan address, including country)

*If Box a. is checked, this form may be executed only when attached to the specification (including claims) at the end thereof. Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE []

(Discard this page in a sole inventor application)

1	Typewritten Full Name	Katsuji	ITC	1	
·	of Joint Inventor	Given Name	Middle Initial	Family Name	
2	Inventor's Signature	Katsuji		,	
3	Date of Signature		mil 7, 2004		
3	Residence Munakata			Country	
	City	State or Prov	rince	Country	
	Citizenship Japane		University of Education,	1-1. Bunkyou-cho.	
	(Insert complete mailing Akama Munakata City Fukuoka Pref., Japan				
	address, including country) Akalla, Mullakata City, Tukaoka Tioti, Capati				
1	Typewritten Full Name of Joint Inventor	Ayako	ISHII		
•	of Joint Inventor	Given Name	Middle Initial	Family Name	
2	Inventor's Signature	Ayak0	Ishii		
3-	Date of Signature	Apr			
3	Residence Munakata		ka Pref., Japan		
	City	State or Prov	rince	Country	
	Citizenship Japanese Post Office Address 3-4-25-210, Ishimaru, Munakata City, Fukuoka Pref.,				
	Post Office Addr (Insert complete maili	na 🕳 .	ISHIMATU, Manakata CICY	1 1011000000	
	address, including cou	ntry) Japan			
1	Typewritten Full Name of Joint Inventor	Tomomi	KURODA		
-	of Joint Inventor	Given Name	Middle Initial	Family Name	
2	Inventor's Signature	Tomomi	Kuroda		
3	Date of Signature	Ap	ril 7, 2004		
-	Residence <u>Munakata</u>	City, Fukuo	ka Pref., Japan	Country	
	Japanese Japanese				
	Post Office Address 3-4-18-111, Ishimaru, Munakata City, Fukuoka Pref.,				
	(Insert complete maili address, including cou	no Taman			
1.	Typewritten Full Name of Joint Inventor		Middle Initial	Family Name	
_		Given Name	MIGGIE IMICIAI	1427	
2	Inventor's Signature				
. 3	Date of Signature				
	Residence City	State or Pro	vince	Country	
	Citizenship				
	Post Office Addr (Insert complete maili	ess			
•	address, including cou	ntry)			
1	Typewritten Full Name				
-	Typewritten Full Name of Joint Inventor	Given Name	Middle Initial	Family Name	
2	Inventor's Signature				
3	Date of Signature				
-	Residence			Country	
	City	State or Pro	ATUCE	Council y	
	Citizenship				
	(Insert complete mail:	ing			
	address, including cou	intry)			

Note to Inventor: Please sign name on line 2 exactly as it appears in line 1 and insert the actual date of signing on line 3.

This form may be executed only when attached to the first page of the Declaration and Power of Attorney of the application to which it pertains.